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TO: EXAMINER KAITLIN S. JOERGER

RE: PATENT APPLICATION ATTORNEY DOCKET NO. 10016161-1

NOV 14 2003

OFFICIAL

IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S): Gerard J. Carlson

CONFIRMATION NO: 3888

SERIAL NO.: 10/056,969

GROUP ART UNIT: 3653

FILED: January 24, 2002

EXAMINER: Joerger, Kaitlin S.

SUBJECT: Input/Output Job Tagging Readable By Mobile Input/Output Bins

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office (Fax No. (703) 872-9306) on the date shown below:

1. This Certification of Facsimile Transmission (1 page)
2. Transmittal Letter for Response/Amendment (1 page)
3. Amendment A (9 pages)
4. Information Disclosure Statement (1 page)
5. Statement Under 37 CFR 1.97(e) (1 page)
6. Form PTO-1449 (1 page)

Date of Facsimile Nov. 14, 2003

Typed Name Terri Walker

Signature Terri Walker

NUMBER OF PAGES IN FACSIMILE: 14

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HEWLETT-PACKARD COMPANY
Intellectual Property Administration
P. O. Box 272400
Fort Collins, Colorado 80527-2400

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208 396 3958 P.02/14

PATENT APPLICATION
ATTORNEY DOCKET NO. 10016161 -1

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Inv ntor(s): Gerard J. Carlson

Confirmation No.: 3888

Application No.: 10/056969

Examiner: Joerger, Kaitlin

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Group Art Unit: 3653

Title: Input/Output Job Tagging Readable By Mobile Input/Output Bins

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- (X) Response/Amendment Petition to extend time to respond
() New fee as calculated below Supplemental Declaration
(X) No additional fee (Address envelope to "Mail Stop Non-Fee Amendment")
(X) Other: IDS & PTO Form 1449 (fee \$)

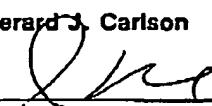
CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS	20	MINUS	20	= 0	X \$18	\$ 0
INDEP. CLAIMS	3	MINUS	3	= 0	X \$86	\$ 0
I FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$290	\$ 0
EXTENSION FEE	1ST MONTH \$110.00	2ND MONTH \$420.00	3RD MONTH \$950.00	4TH MONTH \$1480.00		\$ 0
OTHER FEES						\$ 0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0

Charge \$ 0 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Gerard J. Carlson

By


James R. McDaniel

Attorney/Agent for Appli ant(s)
Reg. No. 34,481

Date: 11/14/03